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Application Number	10/706,720
Filing Date	November 12, 2003
First Named Inventor	S. Montellese
Title	Virtual Holographic Input Method ..
Art Unit	2629
Examiner Name	Holton, S.
Attorney Docket Number	060806

I hereby revoke all previous powers of attorney given in the above-identified application.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Steve Montellese</i>	Date	7/3/2007
Name	Steve Montellese	Telephone	412-492-8500
Title and Company	CTO		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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